PENNSYLVANIA CHIROPRACTIC ASSOCIATION

1335 North Front Street
Harrisburg, PA 17102
717-232-5762 voice
717-232-8368 fax
www.pennchiro.org
pca@pennchiro.org

Increase YOUR Business with Access to 4,000+ Pennsylvania Chiropractors

JOIN PCA TODAY!

STRATEGIC BUSINESS PARTNER - $1300 PER YEAR

PENNSYLVANIA CHIROPRACTIC ASSOCIATION
Strategic Business Partner

- Placement of your logo/link on PCA's website
- Placement of you logo and contact information on the PARTNERS PAGE in the PCA direct
- PCA collaborates with each new SBP to write a brief article announcing the partnership. The announcement is placed on the PCA website and emailed to PCA members.
- State Board of Chiropractic Examiners list of all PA-licensed Chiropractors ***(MAILING ADDRESSES ONLY!)***
- Exclusive sponsorship opportunities at the select PCA Board of Directors meetings, affording you the opportunity to introduce your company to the key decision-makers of PCA
- Preferred sponsorship opportunities at Continuing Education seminars, offering you the opportunity to support specific CE topics and introduce your company to seminar attendees
- Preferred sponsorship for PCA's 14 regional district meetings to introduce your company and services to local chiropractors
- Discounted advertising opportunities for online and print communications.
- Authorized use of the PCA Strategic Business Partner seal

BUSINESS MEMBER - $500 PER YEAR

PENNSYLVANIA CHIROPRACTIC ASSOCIATION
Business Member

- Placement of your logo/link on PCA's website
- PCA Members List ***(MAILING ADDRESSES ONLY!)***
- Preferred sponsorship opportunities at Continuing Education seminars, offering you the opportunity to support specific CE topics and introduce your company to seminar attendees
- Preferred sponsorship for PCA's 14 regional district meetings to introduce your company and services to local chiropractors
- Discounted advertising opportunities for online and print communications.
- Authorized use of the PCA Business Member seal

APPLICATION FOR BUSINESS MEMBERSHIP

Date: _____

Referring PCA member: _____

Company: _____

Address: _____

City: _____State: _____ Zip: _____County: _____

Phone: _____Fax:_____ Mobile: _____

Contact Person/Title: _____

Email: _____

Website: _____

Please provide a brief summary of the services or supplies offered by your company. The summary will be used on the PCA website, in PCA Direct, and as part of 2 formal announcement of your membership with PCA. (Please provide additional information, if necessary): _____

_____

_____

Please provide at least two quotations with attributes, preferably from your company leadership, for use in the introductory announcement and marketing by the PCA: _____

_____

_____

_____

TYPE OF MEMBERSHIP (choose one)

❑ **STRATEGIC BUSINESS PARTNER: $1300/ YEAR** ❑ **BUSINESS MEMBER: $500/ YEAR**

- Please provide your company's high-resolution logo for use on the PCA website and in the PCA Direct.
- Please provide your company's website address for use on the website and in the PCA Direct.

PAYMENT OPTIONS

❑ Enclosed is a check Check #: _____ Amount: $_____

❑ Credit Card (please circle one) Visa MasterCard Discover Amount: $_____

Credit Card #: _____ Expiration Date: _____

Name as it appears on the card: _____ V-code: _____

Signature: _____ Date:_____

Make check payable and mail to:
Pennsylvania Chiropractic Association
1335 North Front Street
Harrisburg, PA 17102

If paying by credit card, you may fax application to 717-232-8368 or email to pca@pennchiro.org.
*If faxing application, please call 717-232-5762 or email pca@pennchiro.org to confirm receipt.

Revised 2-26-16